Ucare

HIOS Issuer ID* 85736 Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	HIOS Product ID*	HPID	Network ID*	Service Area ID*
85736MN0230001	UCare Choices Core	85736MN023		MNN001	MNS001
85736MN0230002	UCare Choices Bronze	85736MN023		MNN001	MNS001
85736MN0230003	UCare Choices Silver	85736MN023		MNN001	MNS001
85736MN0230004	UCare Choices Gold	85736MN023		MNN001	MNS001
85736MN0230005	Fairview UCare Choices Bronze	85736MN023		MNN002	MNS002
85736MN0230006	Fairview UCare Choices Silver	85736MN023		MNN002	MNS002

85736MN0230006

HIOS Issuer ID* 85736 Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers			Plan Attributes	
HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Formulary ID*	New/Existing Plan?*	Plan Type*
85736MN0230001	UCare Choices Core	MNF001	Existing	НМО
85736MN0230002	UCare Choices Bronze	MNF001	Existing	НМО
85736MN0230003	UCare Choices Silver	MNF001	Existing	НМО
85736MN0230004	UCare Choices Gold	MNF001	Existing	НМО
85736MN0230005	Fairview UCare Choices Bronze	MNF001	Existing	НМО

MNF001

Existing

нмо

Fairview UCare Choices Silver

HIOS Issuer ID* 85736 Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Level of Coverage*	Unique Plan Design?*	QHP/Non-QHP*
85736MN0230001	UCare Choices Core	Catastrophic	No	On the Exchange
85736MN0230002	UCare Choices Bronze	Bronze	Yes	On the Exchange
85736MN0230003	UCare Choices Silver	Silver	Yes	On the Exchange
85736MN0230004	UCare Choices Gold	Gold	Yes	On the Exchange
85736MN0230005	Fairview UCare Choices Bronze	Bronze	Yes	On the Exchange
85736MN0230006	Fairview UCare Choices Silver	Silver	Yes	On the Exchange

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Notice Required for Pregnancy*
85736MN0230001	UCare Choices Core	No
85736MN0230002	UCare Choices Bronze	No
85736MN0230003	UCare Choices Silver	No
85736MN0230004	UCare Choices Gold	No
85736MN0230005	Fairview UCare Choices Bronze	No
85736MN0230006	Fairview UCare Choices Silver	No

HIOS Issuer ID* 85736 Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Is a Referral Required for Specialist?*
85736MN0230001	UCare Choices Core	No
85736MN0230002	UCare Choices Bronze	No
85736MN0230003	UCare Choices Silver	No
85736MN0230004	UCare Choices Gold	No
85736MN0230005	Fairview UCare Choices Bronze	No
85736MN0230006	Fairview UCare Choices Silver	No

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers

HIOS Plan ID*(Standard Component) Plan Marketing Name* Specialist(s) Requiring a Referral Plan Level Exclusions

85736MN0230001 UCare Choices Core 85736MN0230002 UCare Choices Bronze 85736MN0230003 UCare Choices Silver 85736MN0230004 UCare Choices Gold

85736MN0230005 Fairview UCare Choices Bronze 85736MN0230006 Fairview UCare Choices Silver

HIOS Issuer ID* 85736 Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Limited Cost Sharing Plan Variation - Est Advanced Payment
85736MN0230001	UCare Choices Core	\$0.00
85736MN0230002	UCare Choices Bronze	\$0.00
85736MN0230003	UCare Choices Silver	\$0.00
85736MN0230004	UCare Choices Gold	\$0.00
85736MN0230005	Fairview UCare Choices Bronze	\$0.00
85736MN0230006	Fairview UCare Choices Silver	\$0.00

HIOS Issuer ID* 85736 Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	HSA Eligible*	HSA/HRA Employer Contribution
85736MN0230001	UCare Choices Core	No	
85736MN0230002	UCare Choices Bronze	No	
85736MN0230003	UCare Choices Silver	No	
85736MN0230004	UCare Choices Gold	No	
85736MN0230005	Fairview UCare Choices Bronze	No	
85736MN0230006	Fairview UCare Choices Silver	No	

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers

85736MN0230001 85736MN0230002

85736MN0230003 85736MN0230004

HIOS Plan ID*(Standard Component) Plan Marketing Name*

UCare Choices Core
UCare Choices Bronze
UCare Choices Silver
UCare Choices Gold

85736MN0230005 Fairview UCare Choices Bronze 85736MN0230006 Fairview UCare Choices Silver **HSA/HRA Employer Contribution Amount**

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Child-Only Offering*	Child Only Plan ID
85736MN0230001	UCare Choices Core	Allows Adult and Child-Only	
85736MN0230002	UCare Choices Bronze	Allows Adult and Child-Only	
85736MN0230003	UCare Choices Silver	Allows Adult and Child-Only	
85736MN0230004	UCare Choices Gold	Allows Adult and Child-Only	
85736MN0230005	Fairview UCare Choices Bronze	Allows Adult and Child-Only	
85736MN0230006	Fairview UCare Choices Silver	Allows Adult and Child-Only	

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Tobacco Wellness Program Offered*
85736MN0230001	UCare Choices Core	No
85736MN0230002	UCare Choices Bronze	No
85736MN0230003	UCare Choices Silver	No
85736MN0230004	UCare Choices Gold	No
85736MN0230005	Fairview UCare Choices Bronze	No
85736MN0230006	Fairview UCare Choices Silver	No

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Disease Management Programs Offered
85736MN0230001	UCare Choices Core	Asthma, Heart Disease, Diabetes
85736MN0230002	UCare Choices Bronze	Asthma, Heart Disease, Diabetes
85736MN0230003	UCare Choices Silver	Asthma, Heart Disease, Diabetes
85736MN0230004	UCare Choices Gold	Asthma, Heart Disease, Diabetes
85736MN0230005	Fairview UCare Choices Bronze	Asthma, Heart Disease, Diabetes
85736MN0230006	Fairview UCare Choices Silver	Asthma, Heart Disease, Diabetes

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers

HIOS Plan ID*(Standard Component)

85736MN0230001

UCare Choices Core
UCare Choices Bronze
UCare Choices Silver
UCare Choices Silver
UCare Choices Gold

85736MN0230005 Fairview UCare Choices Bronze 85736MN0230006 Fairview UCare Choices Silver **Stand Alone Dental Only**

EHB Apportionment for Pediatric Dental

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers

HIOS Plan ID*(Standard Component) Plan Marketing Name* Guaranteed vs. Estimated Rate

85736MN0230001 UCare Choices Core 85736MN0230002 UCare Choices Bronze 85736MN0230003 UCare Choices Silver 85736MN0230004 UCare Choices Gold

85736MN0230005 Fairview UCare Choices Bronze 85736MN0230006 Fairview UCare Choices Silver

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers

HIOS Plan ID*(Standard Component)

85736MN0230001

UCare Choices Core

85736MN0230002

UCare Choices Bronze

85736MN0230003

UCare Choices Silver

85736MN0230004

UCare Choices Gold

85736MN0230005 Fairview UCare Choices Bronze 85736MN0230006 Fairview UCare Choices Silver AV Calculator Additional Benefit Design Maximum Coinsurance for Specialty Drugs

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers

HIOS Plan ID*(Standard Component) Plan Marketing Name*

85736MN0230001 UCare Choices Core 85736MN0230002 UCare Choices Bronze 85736MN0230003 UCare Choices Silver 85736MN0230004 UCare Choices Gold

85736MN0230005 Fairview UCare Choices Bronze 85736MN0230006 Fairview UCare Choices Silver **Maximum Number of Days for Charging an Inpatient Copay?**

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers

HIOS Plan ID*(Standard Component) Plan Marketing Name*

85736MN0230001 UCare Choices Core 85736MN0230002 UCare Choices Bronze 85736MN0230003 UCare Choices Silver 85736MN0230004 UCare Choices Gold

85736MN0230005 Fairview UCare Choices Bronze 85736MN0230006 Fairview UCare Choices Silver **Begin Primary Care Cost-Sharing After a Set Number of Visits?**

HIOS Issuer ID* 85736 Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Begin Primary Care Deductible/ Coinsurance After a Set Number of Copays?
85736MN0230001	UCare Choices Core	3
85736MN0230002	UCare Choices Bronze	3
85736MN0230003	UCare Choices Silver	3
85736MN0230004	UCare Choices Gold	3
85736MN0230005	Fairview UCare Choices Bronze	3
85736MN0230006	Fairview UCare Choices Silver	3

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers		Plan Dates	
HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Plan Effective Date*	Plan Expiration Date
85736MN0230001	UCare Choices Core	1/1/2015	
85736MN0230002	UCare Choices Bronze	1/1/2015	
85736MN0230003	UCare Choices Silver	1/1/2015	
85736MN0230004	UCare Choices Gold	1/1/2015	
85736MN0230005	Fairview UCare Choices Bronze	1/1/2015	
85736MN0230006	Fairview UCare Choices Silver	1/1/2015	

HIOS Issuer ID* 85736 Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers		Geographic Coverage		
HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Out of Country Coverage*	Out of Country Coverage Description	
85736MN0230001	UCare Choices Core	No		
85736MN0230002	UCare Choices Bronze	No		
85736MN0230003	UCare Choices Silver	No		
85736MN0230004	UCare Choices Gold	No		
85736MN0230005	Fairview UCare Choices Bronze	No		
85736MN0230006	Fairview UCare Choices Silver	No		

HIOS Issuer ID* 85736 Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	Out of Service Area Coverage*
85736MN0230001	UCare Choices Core	Yes
85736MN0230002	UCare Choices Bronze	Yes
85736MN0230003	UCare Choices Silver	Yes
85736MN0230004	UCare Choices Gold	Yes
85736MN0230005	Fairview UCare Choices Bronze	Yes
85736MN0230006	Fairview UCare Choices Silver	Yes

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers

HIOS Plan ID*(Standard Component)	Plan Marketing Name*
85736MN0230001	UCare Choices Core
85736MN0230002	UCare Choices Bronze
85736MN0230003	UCare Choices Silver
85736MN0230004	UCare Choices Gold
85736MN0230005	Fairview UCare Choices Bronze
85736MN0230006	Fairview UCare Choices Silver

Out of Service Area Coverage Description

Mental, behavioral, substance abuse and specialty and other practitioner office visit. Mental, behavioral, substance abuse and specialty and other practitioner office visit. Mental, behavioral, substance abuse and specialty and other practitioner office visit. Mental, behavioral, substance abuse and specialty and other practitioner office visit. Mental, behavioral, substance abuse and specialty and other practitioner office visit. Mental, behavioral, substance abuse and specialty and other practitioner office visit.

HIOS Issuer ID* 85736
Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

Plan Identifiers				URLs	
	HIOS Plan ID*(Standard Component)	Plan Marketing Name*	National Network*	URL for Summary of Benefits & Coverage	
	85736MN0230001	UCare Choices Core	No	www.ucare.org	
	85736MN0230002	UCare Choices Bronze	No	www.ucare.org	
	85736MN0230003	UCare Choices Silver	No	www.ucare.org	
	85736MN0230004	UCare Choices Gold	No	www.ucare.org	
	85736MN0230005	Fairview UCare Choices Bronze	No	www.ucare.org	
	85736MN0230006	Fairview UCare Choices Silver	No	www.ucare.org	

HIOS Issuer ID* 85736 Issuer State* MN

Market Coverage* Individual

Dental Only Plan* No

TIN* 36-3573805

HIOS Plan ID*(Standard Component)	Plan Marketing Name*	URL for Enrollment Payment	Plan Brochure
85736MN0230001	UCare Choices Core	www.ucare.org	www.ucare.org
85736MN0230002	UCare Choices Bronze	www.ucare.org	www.ucare.org
85736MN0230003	UCare Choices Silver	www.ucare.org	www.ucare.org
85736MN0230004	UCare Choices Gold	www.ucare.org	www.ucare.org
85736MN0230005	Fairview UCare Choices Bronze	www.ucare.org	www.ucare.org
85736MN0230006	Fairview UCare Choices Silver	www.ucare.org	www.ucare.org